# **APPLICATION DATA SHEET**

# **Application Information**

Application Number::	
Filing Date::	August 4, 2003
Application Type::	Rule 53(b) Divisional Application of 09/833,661
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CFR)?::	
Number of Copies of CFR::	
Title::	OPTICAL FILTER
Attorney Docket Number::	31869-191016
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	6
Small Entity?::	
Latin Name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.::	

### **Applicant Information Applicant Authority Type::** Inventor **Primary Citizenship::** JAPAN Country:: JAPAN Status:: **Full Capacity** Given Name:: Akihiko Middle Name:: Family Name:: NISHIKI Name Suffix:: City of Residence:: Tokyo State or Province of Residence:: **Country of Residence:: JAPAN Street of Mailing Address::** 7-12, Toranomon 1-chome, Minato-ku **City of Mailing Address::** Tokyo State or Province of Mailing Address:: **Country of Mailing Address::** Japan Postal or Zip Code of Mailing Address:: **Applicant Authority Type::** Inventor **Primary Citizenship::** Country:: Status:: **Full Capacity** Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence::

**Country of Residence::** 

Street of Mailing Address::

City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	•
State or Province of Mailing Address:: Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	

Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address:: Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Correspondence Information	
Correspondence Customer Number::	26694
Phone Number::	(202) 962-4800
Fax Number::	(202) 962-8300
E-Mail Address::	
Representative Information	
Representative Customer Number::	<b>26694</b>
Domostic Priority Information	•

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
CURRENT	Division of	09/833,661	April 13, 2001
	Continuation of		
	Continuation of		
	Continuation of		

### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	144707/00	May 17, 2000	YES

## **Assignee Information**

Assignee Name::

Oki Electric Industry Co., Ltd.

**Street of Mailing Address::** 

7-12, Toranomon 1 chome, Minato-Ku

City of Mailing Address::

Tokyo

State or Province of Mailing

Address::

**Country of Mailing Address::** 

**JAPAN** 

Postal or Zip Code of Mailing

Address::

DC2-475448